| Case 16-10696 Doc 1 Fill in this information to identify your case: | Filed 03/29/16 | Entered 03/29/16 14:24:38 age 1 of 72 | Desc Main |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | <u> </u> | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | Part 1: Identify Yourself | | | | | | | | | |
|---|----------------------------|---|--|--|--|--|--|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | | | | | |
| 1. Your full name | Carolyn First name | First name | | | | | | | | |
| Write the name that is on your government-issued | | | | | | | | | | |
| picture identification (for example, your driver's | Middle name Davis | Middle name | | | | | | | | |
| license or passport | Last name | Last name | | | | | | | | |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) | | | | | | | | |
| 2. All other names you | | | | | | | | | | |
| have used in the last | First name | First name | | | | | | | | |
| 8 years | Middle name | Middle name | | | | | | | | |
| Include your married or maiden names. | wilddie flame | midule flame | | | | | | | | |
| madernames. | Last name | Last name | | | | | | | | |
| | First name | First name | | | | | | | | |
| | Middle name | Middle name | | | | | | | | |
| | Last name | Last name | | | | | | | | |
| 3. Only the last 4 digits of your Social | XXX - XX- <u>4447</u> | | | | | | | | | |
| Security number or | OR | OR | | | | | | | | |
| federal Individual Taxpayer Identification | 9 xx - xx- | 9 xx - xx- | | | | | | | | |
| number (ITIN) | | | | | | | | | | |

CarolynCase 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 /14/24:38 Desc Main Debtor 1 Page 2 of 72 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 243 W. 106 Pl. Number Street Number Street Illinois 60628 Chicago City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Carolyn Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 (144):24:38 Desc Main

Document Document Page 3 of 72 Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ₩ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

CarolynCase 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 /14/24:38 Desc Main Debtor 1 Page 4 of 72 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this about credit bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this counseling before you bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of file for bankruptcy. completion. completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment following choices. If plan, if any. plan, if any. you cannot do so, you are not eligible to I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from file. an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and If you file anyway, exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required your creditors can you to file this case. you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military combat zone. military combat zone. If you believe you are not required to receive a briefing about If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

credit counseling, you must file a motion for waiver of credit

counseling with the court.

Doc 1 Filed 03/29/16 Entered 03/29/16 (14:24:38 Desc Main Page 6 of 72 Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. True ? additionalDetails.OtherTypesOfDebt : "" 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **✓** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50-99 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion **|√|** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$100,001-\$500,000 \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X /s/ Carolyn Davis Signature of Debtor 1 Signature of Debtor 2 3/29/2016 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rrect. | | | | |
|----------------------------------|-------|------|----------------|--|
| /s/ Mark Bernachea | | Date | 3/29/2016 | |
| Signature of Attorney for Debtor | | | MM / DD / YYYY | |
| Mark Bernachea | | | | |
| Printed name | | | | |
| Semrad Law Firm | | | | |
| Firm name | | | | |
| Street | | | | |
| City | State | | Zip Code | |
| City | State | | Zip Code | |
| Contact phone | | Er | nail address | |
| Bar number | | | ate | |

<u> Case 16-10696 Doc 1 Filed 03/29/16 Fntered 03/2</u>9/16 14:24:38 Desc Main Fill in this information to identify your case: Debtor 1 Carolyn Davis First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$6,450.00 1b. Copy line 62, Total personal property, from Schedule A/B \$6,450.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$14.307.46 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$14,307.46 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$2,103,03 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,928.00

Debtor 1 CarolynCase 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 (il.44/24:38 Desc Main

Page 9 of 72 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,249.03 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

| | Case 16-10696 | Doc 1 | Filed 03/29/16 | Entered 03/29/16 | 14:24:38 | Desc Main |
|------------------------------------|--|---|--|---|---|---|
| Fill in this i | information to identify your case: | | | | | |
| Debtor 1 | Carolyn | | Davis | 3 | | |
| | First Name | Middle | Name Last | Name | | |
| Debtor 2 (Spouse, it | f filing) First Name | Middle | Name Last | Name | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of I | | | |
| Case num (If known) | ber | | ' | (State) | | |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing |
| Sched | dule A/B: Prope | rty | | | | 12/1 |
| esponsibl rrite your Part 1: | where you think it fits best. Be le for supplying correct inform name and case number (if kno Describe Each Residence I own or have any legal or equ | nation. If more sown). Answer ever, Building, | space is needed, attach ery question. Land, or Other Rea | a separate sheet to this forn | m. On the top of | any additional pages, |
| ✓ | No. Go to Part 2 | | | | | |
| | Yes. Where is the property? | | | | | |
| 1.1 | Street address, if available, or o | ther description | Single-family hom | | the amount of a | recured claims or exemptions. Put ny secured claims on Schedule D: Have Claims Secured by Property. |
| | offoot address, if available, of c | and accomplian | Duplex or multi-ur | ŭ | Current value | , , |
| | | | Condominium or c | • | entire property | |
| | | | Land | iobile nome | | _ |
| | Number Street | | Investment propert | v | | ature of your ownership |
| | | | Timeshare | , | interest (such the entireties. | as fee simple, tenancy by or a life estate), if known. |
| | City State | Zip Code | Other | | | |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and Debt | • | Check if the characteristic (see instru | nis is community property uctions) |
| | | | | debtors and another | | |
| | | | Other information you property identification | ou wish to add about this ite on number: | m, such as local | |
| If you c | own or have more than one, list he | ere: | | | | |
| 1.2 | Street address, if available, or o | ther description | Single-family hom | | the amount of a | recured claims or exemptions. Put ny secured claims on Schedule D: Have Claims Secured by Property. |
| | | | Duplex or multi-ur Condominium or c Manufactured or n | cooperative | Current value entire property | |
| | | | Land | | | <u> </u> |
| | Number Street | | Investment propert Timeshare Other | у | interest (such | ature of your ownership as fee simple, tenancy by or a life estate), if known. |
| | City State | Zip Code | | | | |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and Debt | t in the property? Check one. tor 2 only debtors and another | Check if the chartest (see instru | nis is community property uctions) |

Other information you wish to add about this item, such as local property identification number:

| Debtor 1 | CarolynCase 16-106 | 96 Doc 1 Middle Name | <u>Filed 03/29/16 Entered</u> 03/29/11 Documernt Page 11 of 72 | o∂∂4.4.4.24: <u>38 Des</u> | c Main |
|------------|--|-----------------------------------|--|--|---|
| 1.3 | et address, if available, or oth | | Inat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | the amount of any secure | |
| City | State | Zip Code | Timeshare Other | the entireties, or a life | |
| | | w C C C | The has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co (see instructions) | |
| | | pr ion you own for all o | ther information you wish to add about this item, roperty identification number: of your entries from Part 1, including any entries | for pages | |
| | Describe Your Vehicle | | | | |
| you own th | at someone else drives. If you ns, trucks, tractors, sport utilit | lease a vehicle, also r | any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unextes | | |
| | Make Model: Year: Approximate mileage: Other information: used | Jeep Liberty 2005 123000 | Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | the amount of any secur | claims or exemptions. Put ed claims on Schedule D: eaims Secured by Property. Current value of the portion you own? \$5050.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | the amount of any secur | claims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | | | Check if this is community property (see instructions) | | |

| 3.3 | First Name Middle Name Make Model: | Docume Name Page 12 of 72 Who has an interest in the property? Check one. | Do not deduct secured cl | aims or exemptions. Put | | | |
|----------|---|---|---|---------------------------------------|--|--|--|
| | Model: | | | aims or exemptions. Put | | | |
| | | | the amount of any secured claims on Schedule D: | | | | |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. | | | | |
| | Approximate mileage: | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | Debtor 2 only | Current value of the | Current value of the | | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | | | |
| | | At least one of the debtors and another | | | | | |
| | | Check if this is community property (see instructions) | | | | | |
| - | Make | Who has an interest in the property? Check | Do not deduct secured cl | • | | | |
| | Model: | one. | the amount of any secure | | | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | | | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | | | |
| | | At least one of the debtors and another | | | | | |
| | | Check if this is community property (see instructions) | | | | | |
| | Yes Make | Who has an interest in the property? Check | Do not deduct secured cl | aims or exemptions. Put | | | |
| | Model: | one. | the amount of any secured claims on Schedule D: | | | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | | | |
| | Approximate mileage: | Debtor 2 only | Current value of the | falls Command value of the | | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | Current value of the portion you own? | | | |
| | | At least one of the debtors and another | | | | | |
| | | Check if this is community property (see | | | | | |
| | | instructions) | | | | | |
| 4.2 | Make | Who has an interest in the property? Check | Do not deduct secured cla | • | | | |
| | Model: | one. | the amount of any secure | | | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | | | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | | | |
| | | At least one of the debtors and another | | | | | |
| | | Check if this is community property (see instructions) | | | | | |
| | | , | | | | | |
| 5. Add 1 | the dollar value of the portion you own for a | Il of your entries from Part 2, including any entries t | or pages | 050.00 | | | |

Describe Your Personal and Household Items

| D | o you own or ha | ve any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|----------|---|---|--|
| 6 | . Household goods | and furnishings | |
| | Examples: Major appl | iances, furniture, linens, china, kitchenware | |
| | No | | |
| ✓ | Yes. Describe | miscellaneous household goods and furnishings | \$800.00 |
| | collections | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music s; electronic devices including cell phones, cameras, media players, games | |
| ⊻ | No | | |
| | Yes. Describe | | |
| | | ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles | |
| Ľ | | | |
| Ш | Yes. Describe | | |
| | | orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments | |
| ✓ | No | | |
| | Yes. Describe | | |
| | 0. Firearms Examples: Pistols, riflo | es, shotguns, ammunition, and related equipment | |
| | Yes. Describe | | |
| | 1. Clothes Examples: Everyday o | clothes, furs, leather coats, designer wear, shoes, accessories | |
| ✓ | Yes. Describe | used clothing and apparel | \$500.00 |
| | 2. Jewelry Examples: Everyday je gold, silve | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, r | |
| ✓ | No | | |
| | Yes. Describe | | |
| | 3. Non-farm animals Examples: Dogs, cats | | |
| V | No | | |
| Ė | Yes. Describe | | |
| 1 | 4. Any other person | al and household items you did not already list, including any health aids you did not list | |
| V | No | | |
| | Yes. Describe | | |
| | | lue of all of your entries from Part 3, including any entries for pages you have attached number here | \$1300.00 |

Debtor 1 Carolyn Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 (1):44-24:38 Desc Main

st Name Middle Name Documeritation Page 14 of 72

Describe Your Financial Assets

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes Fifth Third Bank \$100.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

| Deb | tor 1 CarolynCase | | | <u>Entered</u> 03/29/1166/144i | 24: <u>38 Desc Main</u> | |
|-----|---|-------------------------------|---|---|-------------------------|--|
| | First Name | Middle Name | Document Document | Page 15 of 72 | | |
| 20. | Government and co Negotiable instrument Non-negotiable instrument No | | | | | |
| | Yes. Give specific information about them | | | | | |
| | | | | | | |
| 21. | | | x), 403(b), thrift savings accou | nts, or other pension or profit-sharing | plans | |
| | Yes. List each | Type of account: | Institution name: | | | |
| | account separate | 401(k) or similar plan: | - | | | |
| | | Pension plan: | | | | |
| | | IRA: | | | | |
| | | Retirement account: | | | | |
| | | Keogh: | | | | |
| | | Additional account: | | | | |
| | | Additional account: | | | | |
| 22. | Your share of all unuse | ed deposits you have made s | so that you may continue servicent, public utilities (electric, gas | | | |
| | Yes | | Institution name: | | | |
| | | Electric: | | | | |
| | | Gas: | | | | |
| | | Heating oil: | | | , | |
| | | Security deposit on ren | ital unit: | | | |
| | | Prepaid rent: | | | | |
| | | Telephone: | | | | |
| | | Water: | | | | |
| | | Rented furniture: | | | | |
| | | Other: | | | | |
| 23. | | t for a periodic payment of m | noney to you, either for life or fo | r a number of years) | | |
| | ✓ No Yes | Issuer name and descr | ription: | | | |
| | | · | | | | |
| | | | | | | |
| | | | | | | |

| Debte | or 1 | Carolyn C a | ase 1 | 6-10696 | Doc 1 Middle Name | | 03/29/16 cumhethlt ^{me} | | | 6 (Ak4v24: <u>38</u> | Desc Main |
|-------|----------|--|-----------|------------------------------------|----------------------|---------------|-------------------------------------|-----------------|-------------------|----------------------|--|
| 24. | | | | ation IRA, in a), 529A(b), and | | a qualifie | d ABLE progra | m, or under | qualified sta | te tuition program. | |
| | | No Yes | Instituti | on name and d | lescription. Sep | parately file | the records of a | ny interests.1 | U.S.C. § 521(| c): | _ |
| 25. | exe | rcisable fo | or your | | ts in property | (other th | an anything lis | ted in line 1), | and rights or | powers | |
| 26. | | | rights, | | | | r intellectual pro | | | | |
| | _ | mples: Inter No Yes. Desc | | nain names, we | ebsites, procee | eds from ro | yalties and licens | sing agreeme | nts | | |
| 27. | | | | and other ge | | | ssociation holdin | gs, liquor lice | nses, professio | nal licenses | |
| | | No Yes. Desc | ribe | | | | | | | | |
| Mon | iey (| or prope | erty ov | wed to you' | ? | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax | refunds ov | ved to | /ou | | | | | | | · |
| | V | No | | | | | | | | | |
| | | | | nformation ncluding wheth | er | | | | | Federal: | |
| | | you a | lready fi | led the returns | | | | | | State: | |
| 20 | Fa | | • | ears | | | | | | Local: | |
| | | ily suppor <i>npl</i> es: Past | | ump sum alimo | ny, spousal su | pport, child | I support, mainte | nance, divorce | e settlement, pro | operty settlement | |
| | / | No | | | | | | | | | |
| | | Yes. Give s | pecific i | nformation | | | | | | Alimony: | |
| | | | | | | | | | | Maintenance: | |
| | | | | | | | | | | Support: | |
| | | | | | | | | | | Divorce settlement | : |
| | | | | | | | | | | Property settlemen | t: |
| | | | | one owes you es, disability ins | | nts, disabi | lity benefits, sick | pay, vacation p | oay, workers' co | mpensation, | |
| | | | _ | rity benefits; un | | | - | | | | |
| | | No | | | | | | | | | |
| | Ш, | Yes. Descr | ibe | | | | | | | | |

| Debt | or 1 | CarolynCase 16 First Name | <u>6-10696</u> | Doc 1 Middle Name | Filed 03/2 Docume | | Entered 03/26 Page 17 of 72 | 0/11.6 (11.4.4.24: <u>38 [</u> | Desc Main | |
|------|--------|---|-------------------|----------------------|----------------------|------------|--------------------------------|--------------------------------|--|------|
| 31. | | rests in insurance p mples: Health, disabi | | ance; health | | | edit, homeowner's, or rel | nter's insurance | | |
| | | No Yes. Name the insura of each policy and lis | | | Company name: | | | Beneficiary: | Surrender or refund va | lue: |
| 32. | If you | interest in property u are the beneficiary erty because someor No Yes. Describe | of a living trust | | | | olicy, or are currently ent | itled to receive | | _ |
| 33. | Exar | ms against third pa mples: Accidents, em No | | | | | ade a demand for payr | nent | | |
| | | Yes. Describe | | | | | | | | |
| 34. | | er contingent and und et off claims | unliquidated | claims of ev | ery nature, includ | ding cou | nterclaims of the deb | tor and rights | | |
| | | No Yes. Describe | | | | | | | | |
| 35. | _ | financial assets yo | u did not alre | ady list | | | | | | |
| | | Yes. Describe | | | | | | | | |
| 36. | | | - | | _ | - | es for pages you have | | \$100.00 | |
| Part | 5: | Describe Any B | usiness-Re | elated Pro | perty You Owi | n or Ha | ve an Interest In. | List any real estate | in Part 1. | |
| 37. | Do y | ou own or have an | y legal or equ | itable intere | est in any busines | s-related | I property? | | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | | Current value of the portion you own? Do not deduct secured claim or exemptions | าร |
| 38. | _ | ounts receivable or | commissions | you alread | y earned | | | | | |
| | | No Yes. Describe | | | | | | | | _ |
| 39. | | ce equipment, furn nples: Business-rela | | | odems, printers, co | piers, fax | machines, rugs, telepho | ones, desks, chairs, electro | onic devices | |
| | | No Yes. Describe | | | | | | | | |

| | | CarolynCase 16 First Name | | Doc 1 | Filed 03/29/16 Document | Page 18 of 72 | 16 6644424: <u>38</u> | esc Main |
|--------------|----------|--------------------------------------|-------------------|------------------|------------------------------|------------------------------|------------------------------|-------------------------|
| 40. | Mac | hinery, fixtures, eq | uipment, sup | plies you us | se in business, and tools | of your trade | | |
| | ✓ | No | | | | | | |
| | | Yes. Describe | | | | | | |
| 41. | Inve | entory | | | | | | |
| | ✓ | No | | | | | | |
| | | Yes. Describe | | | | | | |
| 42. | Inte | rests in partnershi | ps or joint ve | entures | | | | |
| | ✓ | | . , | | | | | |
| | | | | | Name of entity: | | % of ownership: | |
| | | Yes. Give specific information about | | | | | | |
| | | them | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 43. C | Custo | omer lists, mailing | lists, or othe | r compilatio | ns | | | |
| | V | No | | | | | | |
| | _ | | clude personal | lly identifiable | e information (as defined in | 11 U.S.C. § 101(41A))? | | |
| | | — | | | | | | |
| | | ∐ No | | | | | | |
| | | Yes. Descri | be | | | | | |
| 44. | Any | business-related p | roperty you o | did not alrea | dy list | | | |
| | _ | | | | | | | |
| | | | | | | | | |
| | | Yes. Give specific information | | | | | | |
| | | illioittiauott | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | - | | | s for pages you have attacl | | |
| Part | 6: | Describe Any F | arm- and (| Commerci | ial Fishing-Related F | Property You Own or I | Have an Interest In | ı. |
| 46. | Do | vou own or have a | ny legal or eg | uitable inter | rest in any farm- or com | nercial fishing-related prop | erty? | |
| | | | , | | | | - ·• · | Current value of the |
| | 씜 | No. Go to Part 7. | | | | | | portion you own? |
| | | Yes. Go to line 47. | | | | | | Do not deduct secured |
| | | | | | | | | claims or exemptions |
| 47. | Fari | m animals | | | | | | S. S. S. STIPROTIO |
| | | <i>mples:</i> Livestock, pou | ıltry, farm-raise | ed fish | | | | |
| | V | No | | | | | | |
| | | Yes. Describe | | | | | | 1 |
| | Ш | res. Describe | | | | | | |

| Deb | tor 1 | CarolynCase 16 First Name | 6-10696 | Doc 1 | Filed 03/29/ Document | | ntered 03/2 ge 19 of 72 | 29/16/144/24: <u>38</u> | Desc | Main |
|--------------|----------|---|-----------------|-----------------|--------------------------|------------|----------------------------|---------------------------|--------|-------------|
| 48. | Cro | ps-either growing | or harvested | I | D o o a mone | | .go _o | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| 49. | Fari | m and fishing equi | pment, imple | ements, mach | inery, fixtures, and | tools of t | rade | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| 50. | Fari | m and fishing supp | lies, chemic | als, and feed | | | | | | |
| | V | No | | | | | | | | |
| | Ш | Yes. Describe | | | | | | | _ | - |
| 51. | | farm- and comment farm- and co | | | rty you did not alrea | dy list | | | | |
| | V | No | | | | | | | | |
| | | Yes. Describe | | | | | | | | |
| | | l | | | | | | | | |
| | | | - | | 6, including any en | - | | | | |
| | | | | | | | | | L | |
| | | | | | | | | | | |
| Part | | | | | ave an Interest i | n That ` | You Did Not L | ist Above | | |
| 53. | Exa | ou have other properties: Season tickets | s, country club | membership | not aiready list? | | | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Give specific | | | | | | | | |
| | | information | | | | | | | | |
| | | | | | | | | | | |
| 54. A | dd th | e dollar value of all | l of your entr | ries from Part | 7. Write that number | r here | | | .▶ | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Part | 8: | List the Totals | of Each Pa | art of this F | orm | | | | | |
| 55. F | Part 1 | : Total real estate, l | line 2 | | | | | > | | |
| 56 4 | aart 2 | total vehicles, line | . 5 | | | | | | | |
| | | | | itomo lino 16 | | 50.00 | | | | |
| | | : Total personal and | | illems, ille is | \$13 | 00.00 | | | | |
| | | : Total financial ass | • | | <u>\$10</u> | 0.00 | | | | |
| | | : Total business-re | | • | | | | | | |
| | | : Total farm- and fi | • | | ne 52 | | | | | |
| | | : Total other prope | | | | | | | | |
| 62. 7 | Γotal | personal property. | Add lines 56 t | through 61 | \$64 | 50.00 | | Copy personal property to | ntal ► | + \$6450.00 |
| | | | | | | | | Copy personal property to | Jiai 🚩 | •• |
| 62 T | otal a | of all proporty on S | chodulo A/P | Add line EE + | lino 62 | | | | | \$6450.00 |

| Fill i | n this informa | Case 16-10696 tion to identify your case | e: | Filed | | | | | | |
|------------------------------------|--|---|--|--|--|---|---|--|--|---|
| Deb | tor 1 | Carolyn | | | Davis | | | | | |
| | İ | First Name | Mic | ddle Name | Last Nam | е | | | | |
| | tor 2 buse, if filing) | First Name | Mic | ddle Name | Last Nam | | | | | |
| | | kruptcy Court for the: | Northern | | District of Illino | | | | | |
| | | ikrupicy Court for the. | Northern | | (State | | | | | |
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| Sc | hedule | C: The Pro | perty Y | 'ou Cla | im as Exe | mpt | | | | • |
| 200 | nntad un t | | | | | | | those for | hoalth aid | le riabte to |
| rece exer prop | nption of perty is de | to the amount of an benefits, and ta 100% of fair mark termined to exceed by the Property Your exemptions are you claiming state and federal exemptions are your claiming federal exemptions. | x-exempt ret value uned that amount u Claim as claiming? Corral nonbankrup | retirement nder a law ount, your Exempt heck one only otcy exemption | that limits the exemption wo | e unlimited in exemption to uld be limite | n dollar am o a particul d to the ap | ount. Hov ar dollar a | ever, if yo mount and | ou claim an d the value of |
| rece exer prop | eive certain mption of certy is de 1: Identifi Which set of You are You are | n benefits, and ta 100% of fair mark termined to exceed by the Property You of exemptions are you claiming state and feder | x-exempt ret value uned that amount Claim as claiming? Charal nonbankrup | etirement nder a law ount, your Exempt heck one only otcy exemption C. § 522(b)(2) | funds—may be that limits the exemption wo | e unlimited in exemption to uld be limite e is filing with you b)(3) | n dollar am o a particul d to the ap | ount. Hov ar dollar a | ever, if yo mount and | ou claim an d the value of |
| rece exer prop Part 1. | ive certain mption of certy is de 1: Identif Which set of You are You are For any pro | n benefits, and ta 100% of fair mark termined to exceed by the Property You of exemptions are you claiming state and feder claiming federal exemp | x-exempt ret value unded that amount of the control | retirement nder a law ount, your sexempt heck one only otcy exemption C. § 522(b)(2) a you claim a serient value of portion you | funds—may be that limits the exemption wo geven if your spous as 11 U.S.C. § 522(III) is exempt, fill in the confidence of the confidence | e unlimited in exemption to uld be limite e is filing with you b)(3) | n dollar am b a particul d to the ap J. | ount. How ar dollar a plicable s | rever, if your mount and tatutory and | ou claim an d the value of |
| rece exer prop Part 1. | ive certain mption of coerty is de serve i | n benefits, and ta 100% of fair mark termined to exceed by the Property You claiming state and feder claiming federal exemple perty you list on Schelliption of the property e A/B that lists this present the second state of the property of the property e A/B that lists this present the second state of the property of | x-exempt ret value unded that amount of the control | tetirement ander a law ount, your sexempt theck one only of the exemption your more than the exemption of th | funds—may be that limits the exemption wo get even if your spous as 11 U.S.C. § 522(I) as exempt, fill in the of Amount of I Check only of the company of th | e unlimited in exemption to uld be limite e is filing with you b)(3) | n dollar am b a particul d to the ap J. | ount. How ar dollar a plicable s | vever, if you mount and tatutory and tatutor | ou claim an d the value of mount. |
| rece exer prop Part 1. | prive certain mption of coerty is de serve to the serve t | n benefits, and ta 100% of fair mark termined to exceed by the Property You of exemptions are you claiming state and feder claiming federal exemptions of the property you list on Schein in the property | x-exempt ret value unded that amount of the control | tetirement ander a law ount, your a Exempt theck one only of the exemption of the exemption of the exemption and the exemption your more than the exemption of the | funds—may be that limits the exemption wo geven if your spous as 11 U.S.C. § 522(III) is exempt, fill in the confidence of the confidence | e unlimited in exemption to uld be limite e is filing with you b)(3) | n dollar am b a particul d to the ap J. How. You claim exemption. | ount. How ar dollar a plicable s | vever, if you mount and tatutory and tatutor | ou claim an d the value of mount. |
| rece exer prop Part 1. | ive certain mption of coerty is de serve i | n benefits, and ta 100% of fair mark termined to exceed by the Property You of exemptions are you claiming state and feder claiming federal exemptions of the property you list on Schein in the property e A/B that lists this property is a fifth Third Bank | x-exempt ret value unded that amount of the control | tetirement ander a law ount, your sexempt theck one only of the exemption your more than the exemption of th | funds—may be that limits the exemption wo exemption wo exemption wo exempt for spous as 11 U.S.C. § 522(III) is exempt, fill in the of Amount of III Check only of the composition of th | e unlimited in exemption to uld be limite e is filing with you b)(3) e information be the exemption you box for each of \$100.0 | n dollar am o a particul d to the ap u. low. vou claim exemption. | ount. How ar dollar a plicable s | vever, if you mount and tatutory and tatutor | ou claim an d the value of mount. |
| rece exer prop Part 1. | prive certain mption of coerty is de serve to the serve t | n benefits, and ta 100% of fair mark termined to exceed by the Property Your claiming state and feder claiming federal exemple perty you list on Schein in the property e A/B that lists this property is Fifth Third Bank | x-exempt ret value unded that amount of the control | retirement nder a law ount, your sexempt heck one only otcy exemption C. § 522(b)(2) a you claim a surrent value of portion your multiply the value friedule A/B \$100.00 | funds—may be that limits the exemption wo geven if your spous as 11 U.S.C. § 522(III) in the control of the con | e unlimited in exemption to uld be limite e is filing with you b)(3) e information be the exemption you have box for each e | n dollar am o a particul d to the ap u. low. vou claim exemption. | ount. How ar dollar a plicable s | rever, if you mount and tatutory and tatutor | ou claim an d the value of mount. |
| rece exer prop Part 1. | prive certain mption of coerty is de serve to the serve t | n benefits, and ta 100% of fair mark termined to excee fy the Property Yo of exemptions are you claiming state and feder claiming federal exemp perty you list on Sche iption of the property e A/B that lists this pr | x-exempt ret value unded that amount u Claim as a claiming? Cural nonbankrup stions. 11 U.S.C. adule A/B that and line coperty the own Coperty the cop | tetirement ander a law ount, your sexempt theck one only of the exemption your more than the exemption of th | funds—may be that limits the exemption wo exemption wo exemption wo exempt for spous as 11 U.S.C. § 522(III) is exempt, fill in the of Amount of III Check only of the composition of th | e unlimited in exemption to uld be limite e is filing with you b)(3) e information be the exemption you box for each of \$100.0 | n dollar am b a particul d to the ap J. How. You claim exemption. | ount. How ar dollar a plicable s | rever, if you mount and tatutory and tatutor | ou claim an d the value of mount. |

☐ No☐ Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Entered 03/29/16 /14/24:38 Desc Main CarolynCase 16-10696 Doc 1 Filed 03/29/16 Debtor 1

Page 21 of 72 Document Metal time Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) used clothing and Brief \$500.00 **✓** description: apparel \$500.00 Line from 100% of fair market value, up to any Schedule A/B: 11 applicable statutory limit 735 ILCS 5/12-1001(c); 735 ILCS Brief \$5,050.00 \checkmark 5/12-1001(b) description: used \$4,800.00; \$250.00 Line from 100% of fair market value, up to any

applicable statutory limit

Schedule A/B:

03

| Fill in this inform | Case 16-10696 nation to identify your case | | 03/29/16 | Entered 03/29/ | 16 14:24:38 | Desc Main | |
|----------------------------|--|---|--------------------|----------------------------|---|---|------------------------------------|
| Debtor 1 | Carolyn First Name | Middle Name | Davis | | | | |
| Debtor 2 | | Middle Name | Last Na | ame | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Na | ame | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illin | nois tate) | | | |
| Case number (If known) | - | | | <u> </u> | | | |
| Official F | Form 106D | | | | | | eck if this is ar nended filing |
| Schedu | le D: Credit | ors Who Hav | ∕e Clain | ns Secured | by Prope | rty | 12/15 |
| correct infor form. On the | mation. If more spa | s possible. If two man ice is needed, copy to nal pages, write your ired by your property? | he Additiona | al Page, fill it out, r | number the entri | • | |
| | heck this box and submit the fill in all of the information be | nis form to the court with you below. | r other schedules | s. You have nothing else t | o report on this form. | | |
| Part 1: List | All Secured Claims | | | | | | |
| claim. If mo | re than one creditor has a | has more than one secured particular claim, list the other al order according to the cre | er creditors in Pa | • • | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

| | | Case 16-10696 | 6 Doc 1 Filed | 03/29/16 | Entered 03 | <i>[</i> 29/16 14:24:38 | Desc | Main | |
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| Fill in | this informa | ation to identify your case | | | | | 2000 | | |
| Debt | or 1 | Carolyn | | Davis | | | | | |
| 5 1 4 | | First Name | Middle Name | Last N | ame | | | | |
| Debte (Spot | | First Name | Middle Name | Last N | ame | | | | |
| Unite | d States Ba | nkruptcy Court for the: | Northern | District of III | inois State) | | | | |
| | number | | | (0 | otate) | | | | |
| (If kno | , | 100=/= | | | | | □ cha | | |
| Offi | cial Fo | orm 106E/F | | | | | | ck if this is an | n amended filing |
| Sc | hedu | le E/F: Cre | ditors Who | Have U | nsecure | d Claims | | | 12/15 |
| 106Á/l are lis the bo | B) and on S ted in Sche exes on the | Schedule G: Executory edule D: Creditors Who left. Attach the Contin | xpired leases that could r Contracts and Unexpired of Hold Claims Secured by nuation Page to this page Y Unsecured Claims | d Leases (Officially Property. If mo . On the top of a | al Form 106G). Do ore space is neede | not include any credito d, copy the Part you ne | rs with parti ed, fill it out | allý secured , number th | d claims that ne entries in |
| 1. | _ ′ | ditors have priority unso to Part 2. | secured claims against yo | ou? | | | | | |
| | identify what possible, list Part 1. If mo | t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hold | claims. If a creditor has mo aim has both priority and nor al order according to the cre ds a particular claim, list the claim, see the instructions for | npriority amounts editor's name. If y other creditors in | , list that claim here a ou have more than n Part 3. | and show both priority and | d nonpriority a | amounts. As | much as |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | | | | | | | | | |

Doc 1 CarolynCase 16-10696 Debtor 1 Docum่ซีที่เ^{me} Page 24 of 72 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 <u>CCI</u> \$108.00 Last 4 digits of account number 0209 Nonpriority Creditor's Name 501 Greene Street # 302 When was the debt incurred? 6/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent Augusta Georgia 30901 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 City of Chicago Parking \$2,034.51 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60602 Chicago Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 City of Hometown \$270.00 Last 4 digits of account number Nonpriority Creditor's Name 4331 Southwest Highway When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Hometown Illinois 60456 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

Other. Specify

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

you did not report as priority claims

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Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Convergent \$209.00 Last 4 digits of account number Nonpriority Creditor's Name po box 1022 When was the debt incurred? 7/1/2014 Street Number As of the date you file, the claim is: Check all that apply. Contingent Wixom Michigan 48393 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? V **✓** No Yes 4.5 CREDIT UN 1 \$725.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E CHÁMPAIGN AV When was the debt incurred? 3/1/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent **RANTOUL** 61866 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ͷ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Is the claim subject to offset? No Yes 4.6 DIVERSIFIED CONSULTANT \$275.00 Last 4 digits of account number 8911 Nonpriority Creditor's Name 10550 DEERWOOD PARK BLVD 11/1/2015 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 City Unliquidated State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

|**~**| No Yes Other. Specify

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| | First Name | Middle Name | Documetht end | Page 26 of 72 | |
| Dart 2 | Your NONPRIORITY Linea | cured Clair | | • | |

| | After listing any entries on this page, number them beginning v | vith 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.7 | EOS CCA Nonpriority Creditor's Name PO BOX 981008 Number Street BOSTON Maine 02298 City State Zip Code | Last 4 digits of account number 1751 When was the debt incurred? 8/1/2012 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | \$346.00 |
| | Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |
| 4.8 | ESCALLATE LLC Nonpriority Creditor's Name 1606 E TURKEYFOOT LAKE R Number Street AKRON Ohio 44312 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No | Last 4 digits of account number 7654 When was the debt incurred? 4/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$462.00 |
| 4.9 | JVDB ASC | Last 4 digits of account number | \$2,459.00 |

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| Part 2: Y | our NONPRIORITY | Unsecured | Claims - | Continuation | Page |
|-----------|-----------------|-----------|----------|--------------|------|
|-----------|-----------------|-----------|----------|--------------|------|

| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
|---|---|-------------|
| After listing any entries on this page, number them beginning 4.10 PEOPLES ENGY | with 4.5, followed by 4.6, and so forth. Last 4 digits of account number 7173 When was the debt incurred? 1/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | \$895.00 |
| PEOPLES ENGY Nonpriority Creditor's Name 200 EAST RANDOLPH Number Street | Last 4 digits of account number | \$365.00 |
| PORTFOLIO RECOVERY ASS Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 Number Street NORFOLK Virginia 23502 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 2123 When was the debt incurred? 7/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$683.00 |

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rst Name Middle Name

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Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.13 PORTFOLIO RECOVERY ASS \$504.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 3/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **NORFOLK** Virginia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.14 PORTFOLIO RECOVERY ASS \$504.00 9333 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 3/1/2015 Street Number As of the date you file, the claim is: Check all that apply. Contingent **NORFOLK** 23502 Virginia Unliquidated City State Zip Code Who incurred the debt? Check one Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? \square Other, Specify **I**✓ No Yes 4.15 Portfolio Recovery Associates \$403.00 Last 4 digits of account number Nonpriority Creditor's Name PO Bo x12914 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Norfolk Virginia 23541 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify

✓ No Yes

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Document Page 29 of 72 Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.16 Progressive Leasing \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 10619 South Jordan Gateway # 100 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Utah 84095 South Jordan Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.17 RECEIVABLES PERFORMANC \$366.00 Last 4 digits of account number Nonpriority Creditor's Name 20816 44th Avenue W When was the debt incurred? 11/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Washington 98036 Lvnnwood Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? \square Other, Specify **✓** No Yes 4.18 SNCHNFIN \$200.00 Last 4 digits of account number 1ZS2 Nonpriority Creditor's Name 1900 Hassell Rd When was the debt incurred? 10/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Hoffman Est Illinois 60169 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|--|---|-------------|
| 4.19 STELLAR RECOVERY INC Nonpriority Creditor's Name 4500 Salisbury Rd Ste 10 Number Street | Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. | \$274.95 |
| Jacksonville Florida 32216 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |
| TEK COLLECT Nonpriority Creditor's Name PO Box 1269 Number Street | Last 4 digits of account number | \$2,824.00 |
| Is the claim subject to offset? No Yes | ✓ Other. Specify | |

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| Part 3: | List | Others | to Be | Notified | About a | Debt | That | You | Already | Listed |
|---------|------|--------|-------|----------|---------|------|------|-----|---------|--------|

| agency here. Simi | larly, if you have m | ore than one credito | you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection r for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you bbts in Parts 1 or 2, do not fill out or submit this page. |
|-------------------|----------------------|----------------------|---|
| Jerry Salzberg LL | С | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| P.O Box 5718 | | | Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | t | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Elgin | Illinois | 60121 | Last 4 digits of account number IR52 |
| City | State | Zip Code | |
| HARRIS & HARR | IS LTD | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 111 W JACKSON | BLVD S-400 | | Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | t | | Part 2: Creditors with Nonpriority Unsecured Claims |
| CHICAGO | Illinois | 60604 | Last 4 digits of account number |
| Citv | State | Zip Code | |

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Add the Amounts for Each Type of Unsecured Claim

| | Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only 28 U.S.C. §159. Add the amounts for each type of unsecured claim. | | | | | | | | |
|--------------------------|---|---|-----|--------------|--|--|--|--|--|
| | | | | Total claims | | | | | |
| Total claims from Part 1 | 6a. | Domestic support obligations. | 6a. | \$0.00 | | | | | |
| | 6b. | Taxes and certain other debts you owe the | 6b. | \$0.00 | | | | | |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | | | | |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | | | | |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$0.00 | | | | | |
| | | | | Total claims | | | | | |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 | | | | | |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | | | | |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | | |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$14,307.46 | | | | | |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$14,307.46 | | | | | |

| | Case 16-10696 | 5 Doc 1 Filed 0: | 3/20/16 Entor | ed 03/29/16 14:24:38 | Desc Main |
|------------------------|-----------------------------------|---------------------------------|------------------------------|--|-----------------------------------|
| Fill in this infor | rmation to identify your case | | 3// 9/ TU TIME! | EH 13/2 9/10 14.24.30 | Desc Main |
| Debtor 1 | Carolyn First Name | Middle Nesse | Davis | | |
| Debtor 2 | FIRST Name | Middle Name | Last Name | | |
| (Spouse, if filing | ng) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | | | |
| , , | Form 106G | | | | Check if this is a amended filing |
| Schedu | le G: Executo | ory Contracts | and Unexpir | ed Leases | 12/1 |
| | ed, copy the additional pa | | | re equally responsible for supply his page. On the top of any additi | |
| 1. Do you l | have any executory o | ontracts or unexpired | l leases? | | |
| No. Ch | neck this box and file this form | n with the court with your othe | r schedules. You have no | thing else to report on this form. | |
| ✓ Yes. Fi | ill in all of the information bel | ow even if the contracts or lea | ases are listed on Schedu | ule A/B: Property (Official Form 106A | √B). |
| | | | | nen state what each contract or le e examples of executory contracts ar | |
| Perso | on or company with whom | you have the contract or le | ease | State what the contrac | t or lease is for |
| 2.1 Walco Ir Name | nc | | | Residential Lease, Debtor is Lessee, residential yearly | |
| 3527 Do Number | | | | residential yearly | |

Illinois State

60461 Zip Code

Olympia Fields City

| | | Case 16-1069 | 6 Doc 1 Filed 0 |)3/29/16 Entered (| 02/20/16 1 <i>A</i> ·2 <i>A</i> ·20 | Desc Main |
|----------------|--|---|--|------------------------------------|---|---|
| Fill | in this inform | ation to identify your case | | | 13/2 9/10 14.24.30 | Desc Main |
| De | btor 1 | Carolyn | | Davis | _ | |
| _ | | First Name | Middle Name | Last Name | | |
| | btor 2 oouse, if filing | First Name | Middle Name | Last Name | _ | |
| Un | ited States Ba | ankruptcy Court for the: | Northern | District of Illinois | _ | |
| | se number | | | (State) | _ | |
| (11.1 | | | | | | Check if this is a amended filing |
| O | fficial F | Form 106H | | | | amended illing |
| | | e H: Your Co | odebtors | | | 12/1: |
| toge in the | ether, both a ne boxes on ry question. | re equally responsible the left. Attach the Add | for supplying correct infor- litional Page to this page. O | mation. If more space is need | ded, copy the Additional Pag ages, write your name and c | If two married people are filing e, fill it out, and number the entries ase number (if known). Answer |
| •• | ✓ No Yes | e any codebiors: (ii yo | u are illing a joint case, uo no | t iist eitrier spouse as a codebic | n.) | |
| 2. | Louisiana, No. G | levada, New Mexico, Pue o to line 3. | ived in a community proper erto Rico, Texas, Washington, pouse, or legal equivalent live v | and Wisconsin.) | unity property states and territor | ies include Arizona, California, Idaho, |
| | Y | es. In which community s | tate or territory did you live? | Fill | in the name and current addres | ss of that person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | - | |
| | | Number Street | | | - | |
| | | City | State | Zip Code | - | |
| 3. | as a codeb | tor only if that person i | s a guarantor or cosigner. I | _ | e creditor on <i>Schedule D</i> (Of | the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in th | is information to identify | your case: | - | | 9/16 14 | :24:38 | Desc M | ain | |
|-----------------------|--|--|----------------------------|-------------------------|----------------------|--------------|---------------------------------------|---------|-----------------------------|
| | | Docar | | g c 55 01 | 7.2 | | | | |
| Debtor 1 | Carolyn First Name | Middle Name | Davis Last Name | | - | | | | |
| Debtor 2 | r not reamo | Wildaio Harrio | Lactitatio | | | Check if thi | s is: | | |
| | f filing) First Name | Middle Name | Last Name | | - | An ame | ended filing | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illinois | | _ | | olement showing ses as of the foll | | petition chapter 1 date: |
| Case num | ber | | (State) | | | | | _ | |
| (If known) | | | | | _ | MM / D | D/YYYY | | |
| Officia | al Form 106I | | | | | | | | |
| 3che | dule I: Your Inc | ome | | | | | | | 12/1 |
| nclude nformat | information about you ion about your spouse vrite your name and ca | rect information. If you a r spouse. If you are sep e. If more space is neede se number (if known). A nt | arated and yed, attach a s | our spous eparate sl | se is not filin | g with yo | u, do not | inclu | de |
| 1. | Fill in your employment information. | | Debtor 1 ✓ Employed | | Debtor 2 | | | | |
| | | Employment status | | | Employed | | | | |
| | If you have more than one job, attach a separate page with information about additional employers. | | ☐ Not Employed | | ☐ Not Employed | | | | |
| | | | | ou . | | L NOCE | прюуса | | |
| | | Occupation | Clerk | | | | | | |
| | | Employer's name | United States P | ostal Service | | | | | |
| | Include part time, seasonal, | Employer's address | 2591 Busse Rd | | | | | | |
| | or self-employed work. | | Number Street | | | Number Str | eet | | |
| | Occupation may include | | | | | | | | |
| | student | | | | | | | | |
| | or homemaker, if it applies. | | Elk Grove | Illinois | 60007 | | | | |
| | | | Village | <u> </u> | | City | S | ate | Zip Code |
| | | How long employed there? | City | State | Zip Code | | | | |
| | | iong omployed allore. | 20 years | | | | | | |
| Dort 2 | Give Details About I | Manthly Income | | | | | | | |
| rail 2. | Give Details About I | wonting income | | | | | | | |
| Fetimate | monthly income as of the | date you file this form. If you ha | ave nothing to rep | ort for any line | e write \$0 in the s | nace Includ | le vour non-filir | na snoi | ise unless vou |
| are sepa | | date you me tins form. If you no | ave nothing to rep | ortiol arry link | s, write to in the s | pacc. Includ | ic your norrillin | ig spot | asc unicss you |
| | • • | re than one employer, combine th | ne information for a | all employers | for that person on | the lines be | low. If you nee | d more | space, attach |
| a s c para | te sheet to this form. | | | For | Debtor 1 | For Debt | or 2 or g spouse | | |
| | | y, and commissions (before all loulate what the monthly wage wo | | | \$3,999.99 | | | _ | |
| 3. Est | imate and list monthly overt | ime pay. | 3 | . <u>_</u> | + \$0.00 | _ | | _ | |
| 4. Cal | culate gross income. Add lin | e 2 + line 3 | 4 | | \$3,999.99 | | | _ | |

Debtor 1 Carolyn Case 16-10696 Doc 1 Filed 03/29/16 Entered @3/29/136 14:24:38 Desc Main Documentame Page 36 of 72 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$3,999.99 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$972.36 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$924.60 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$1,896.96 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,103.03 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: Workers Compensation Income 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$2,103.03 \$2,103.03 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$2,103.03 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

| | Case 16-1069 | | 3/29/16 Entered 03/ | 29/16 14:24:38 I | Desc Mair | า |
|--------------------------------|-------------------------------|--|---|--------------------------------------|--------------------------|--------------|
| Fill in this inform | ation to identify your case | e: - | Ū | | | |
| Debtor 1 | Carolyn | | Davis | | | |
| D. I | First Name | Middle Name | Last Name | Oh a ale if their inc | | |
| Debtor 2 (Spouse, if filing | First Name | Middle Name | Last Name | Check if this is: | | |
| | | | | An amended filing | | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinois (State) | A supplement show expenses as of the | • | n chapter 13 |
| Case number | | | (Giaic) | 0.4poi.1000 d0 0.1 u.10 | .o.o.og dato. | |
| (If known) | | | | MM / DD / YYYY | | |
| Official F | Form 106J | | | | | |
| | | | | | | |
| schedul | e J: Your Ex | penses | | | | 12/1 |
| nformation. If n | | | e filing together, both are equally form. On the top of any additiona | | | oer |
| | ribe Your Househo | old | | | | |
| 1. Is this a join | | | | | | |
| ✓ No. Go | | | | | | |
| | | manata hassashal 10 | | | | |
| Yes. Do | es Debtor 2 live in a se - | parate nousenoid? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 must file | Official Forms 106J-2, Experi | ses for Separate Household of Debt | or 2. | | |
| 2. Do you have | dependents? V | 0 | | | | |
| Do not list De Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depend with you? | dent live |
| 3. Do your exp | I → I NI | _ | | | | |
| expenses of than | people other | 0 | | | | |
| yourself and | your Ye | es | | | | |
| dependents | ? | | | | | |
| Part 2: Estin | nate Your Ongoing | Monthly Expenses | | | | |
| • | f a date after the bankr | . , . | you are using this form as a suppoplemental Schedule J, check the | • | • | |
| | | ash government assistance on Schedule I: Your Incom | | | Yo | our expenses |
| | | | iclude first mortgage payments and | | | • |
| any rent for | the ground or lot. 4. | enses for your residence. II | oluuu IIIsi moriyaye paymenis and | | 4. | \$1,000.00 |
| | ded in line 4: | | | | | |
| 4a. Real es | | | | | 4a | \$0.00 |
| | , homeowner's, or renter | | | | 4b. | \$0.00 |
| 4c. Home m | naintenance, repair, and u | pkeep expenses | | | 4c. | \$0.00 |

\$0.00

4d.

4d. Homeowner's association or condominium dues

ebtor 1 CarolynCase 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 (1):44-24:38 Desc Main

Document Page 38 of 72 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$75.00 6a. 6b. Water, sewer, garbage collection \$21.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$175.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$300.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$75.00 9. 10. Personal care products and services \$25.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$157.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1 | CarolynCase 16-10696 First Name | Doc 1 | Filed 03/29/16 Document | Entered 03/29/16 /14 | ₩24: <u>38 Desc M</u> | <u>ain</u> |
|-------------------|--|--------------------|-------------------------------|------------------------|-----------------------|------------|
| 21. Other. | Specify: | | Document | Page 39 of 72 | 21 | \$0.00 |
| | | | | | | |
| 22. Calcu | late your monthly expenses. | | | | | \$1,928.00 |
| 22a. A | dd lines 4 through 21. | | | | | \$0.00 |
| 22b. C | opy line 22 (monthly expenses fo | or Debtor 2), if a | ny, from Official Form 106J | -2 | | \$1,928.00 |
| 22c. A | dd line 22a and 22b. The result is | your monthly e | xpenses. | | 22. | |
| 23. Calcul | ate your monthly net income. | | | | | |
| 23a. C | opy line 12 (your combined mont | hly income) fror | n Schedule I. | | 23a | \$2,103.03 |
| 23b. C | opy your monthly expenses from I | line 22 above. | | | 23b | \$1,928.00 |
| | ubtract your monthly expenses fro The result is your monthly net inco | | income. | | 23c | \$175.03 |
| 24. Do yo | u expect an increase or decrea | ase in your ex | penses within the year af | er you file this form? | | |
| | xample, do you expect to finish pa page payment to increase or decr | , , , | | | | |
| | | case because | or a modification to the term | is or your mortgage: | | |
| ✓ Y | es | | | | | |
| | Explain here: | | | | | |
| | Debtor anticipates retui | rning to her job | within then next week/mont | h | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | Case 16-1069 | 6 Doc 1 Filad 03 | 2/20/16 Entor | ed 03/29/16 14:24:38 | Desc Main |
|-------------------------------|---|-------------------------------|--|---|-----------------------------------|
| Fill in this infor | rmation to identify your case | | 5/2 9/10 1 III E 11 | -110.3/2.9/10 14.24.30 | Desc Main |
| Debtor 1 | Carolyn | | Davis | | |
| Dalata | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filir | ng) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | _ |
| Official | Form 106De | <u>c</u> | | | Check if this is a amended filing |
| Declara | ition About a | n Individual De | btor's Sched | dules | 12/1 |
| f two married | people are filing togethe | r, both are equally responsit | ole for supplying corre | ct information. | |
| Part 1: Sig | n Below | one who is NOT an attorney | to help you fill out ban | kruptcy forms? | |
| ✓ No | | | | | |
| Yes. | Name of person | | _ Attach Bankrupto Signature (Officia | cy Petition Preparer's Notice, Decla al Form 119). | ration, and |
| • | enalty of perjury, I declare are true and correct. | e that I have read the summa | ry and schedules filed | with this declaration and | |
| 🗶 /s/ Carol | lyn Davis | | × | | |
| Signature | of Debtor 1 | | Signat | ture of Debtor 2 | |
| Date <u>3/2</u> | 9/2016 M/DD/YYYY | | Date | MM/DD/YYYY | |

| sc Main | tered 03/29/16 14:24:38 De | Filed 03/29/16 F | | Case 16-10696 ation to identify your case: | Fill in this informa |
|-----------------------------------|---|--|--|---|--|
| | | Davis | | Carolyn | Debtor 1 |
| | | lame Last Name | Middle Na | First Name | Debtor 2 |
| | | lame Last Name | Middle Na | First Name | (Spouse, if filing) |
| | | District of Illinoi (State | Northern | ankruptcy Court for the: | United States Ba |
| | | (Oldan | | | Case number (If known) |
| Check if this is a amended filing | | | | orm 107 | Official F |
| 12/1 | Filing for Bankruptcy | for Individual | al Affairs | | |
| | oth are equally responsible for supplying co les, write your name and case number (if ko Before | | et to this form. On t | l, attach a separate shee | space is needed |
| | | | itus? | your current marital stat | 1. What is y |
| | | | | ried married | ☐ Marr ✓ Not r |
| | ? | ther than where you live no | ı lived anywhere ot | ne last 3 years, have you | 2. During th |
| | e now. | rs. Do not include where you | ved in the last 3 year | List all of the places you liv | ✓ No Yes. |
| Dates Debtor 2 lived there | Debtor 2: | Dates Debtor 1 lived there | | tor 1: | Debt |
| Same as Debtor 1 | Same as Debtor 1 | | | | |
| — From | Number Street | From | | ber Street | Numi |
| To | | То | | | |
| _ | City State Zip Code | | Zip Code | State | City |
| Same as Debtor 1 | Same as Debtor 1 | | | | |
| — From | Jumber Street | From | | her Street | Numl |
| To | taribo. Guodi | То | | | |
| _ | City State Zip Code | | Zip Code | State | City |
| | · · · · · · · · · · · · · · · · · · · | | • | | |
| To | | se or legal equivalent in a levada, New Mexico, Puerto | Zip Code er live with a spous Idaho, Louisiana, No | ber Street State last 8 years, did you eve | Numl City 3. Within the laterritories in V No |

Debtor 1 CarolynCase 16-10696 First Name <u>Filed 03/29/16 Entered 03/29/16 1.4:2</u>4:<u>38 Desc Main</u> Docume Page 42 of 72 Doc 1

Part 2: Explain the Sources of Your Income

| Fill in the total amount of income you received for | rom all jobs and all businesses | , including part-time | | | | |
|--|---|--|--|---|--|--|
| | Debtor 1 | | Debtor 2 | | | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | | | |
| For last calendar year: (January 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | | | |
| For the calendar year before that: (January 1 to December 31, | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | | | |
| Include income regardless of whether that incombenefit payments; pensions; rental income; interest and you have income that you received together, | ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1. | income are alimony; child s from lawsuits; royalties; and | gambling and lottery winnings. | | | |
| | Debtor 1 | | Debtor 2 | | | |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | |
| From January 1 of current year until the date you filed for bankruptcy: | YTD Workers Compensation | \$6,379.26 | | | | |
| For last calendar year: (January 1 to December 31, | 2015 Workers Compensation | \$25,517.04 | | | | |
| For the calendar year before that: (January 1 to December 31, 2014) | 2014 Workers Compensation | \$25,517.04 | | | | |
| | Fill in the total amount of income you received factivities. If you are filing a joint case and you have a long or yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, | Fill in the total amount of income you received from all jobs and all businesses activities. If you are filing a joint case and you have income that you receive tog No Yes. Fill in the details. Debtor 1 | Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under only not yes. Fill in the details. Debtor 1 | activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 | | |

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| Part 3: | List Ce | rtain Pa | yments Y | ou Made Before | You Filed for Bar | nkruptcy | | |
|----------|-----------------|--------------|----------------|--|----------------------------|--|-----------------------------|------------------------------|
| 6. Are | either De | btor 1's o | r Debtor 2's | debts primarily con | sumer debts? | | | |
| | | | | tor 2 has primarily c usehold purpose." | onsumer debts. Cons | sumer debts are defined in 11 | U.S.C. § 101(8) as "incurre | d by an individual primarily |
| | Duri | ng the 90 c | lays before yo | ou filed for bankruptcy, | did you pay any credito | or a total of \$6,225* or more? | | |
| | П | No. Go to | line 7. | | | | | |
| | | total | l amount you | paid that creditor. Do | not include payments for | more in one or more payment or domestic support obligation attorney for this bankruptcy ca | s, such as | |
| | * Sul | bject to adj | ustment on 4 | /01/16 and every 3 yea | ars after that for cases f | iled on or after the date of adju | istment. | |
| ✓ | Yes. Deb | tor 1 or D | ebtor 2 or b | oth have primarily o | consumer debts. | | | |
| | Durii | ng the 90 c | lays before y | ou filed for bankruptcy, | , did you pay any credito | or a total of \$600 or more? | | |
| | V | No. Go to | line 7. | | | | | |
| | | that | creditor. Do | not include payments | for domestic support of | ore and the total amount you p bligations, such as child suppo | | |
| | | alim | ony. Also, do | not include payments | to an attorney for this b | ankruptcy case. | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | Creditor' | 's Name | | | - | | | Mortgage |
| | Number | Street | | | | | | Car Credit card |
| | | UU | | | | | | Loan repayment |
| | | | | | | | | Suppliers or |
| | City | | State | Zip Code | | | | vendors |
| | | | | | | | | Other Mortgage |
| | Creditor' | 's Name | | | | | | Mortgage Car |
| | Number | Street | | | | | | Credit card |
| | | | | | | | | Loan repayment |
| | 0:: | | | | | | | Suppliers or vendors |
| | City | | State | Zip Code | | | | Other |
| | Out dit and | la Nia | | | | | | - Mortgage |
| | Creditor' | s Name | | | | | | Car |
| | Number | Street | | | | | | Credit card |
| | | | | | | | | Loan repayment |
| | City | | State | Zin Codo | | | | Suppliers or vendors |
| | City | | Siale | Zip Code | | | | Other |

CarolynCase 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 (1.4.24:38 Desc Main Debtor 1 Document Page 44 of 72 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 CarolynCase 16-10696 First Name Doc 1

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| 9. | | n 1 year before you filed for bankruptcy, w such matters, including personal injury cases es. | | | | | | |
|----|---|---|----------|---|-----------------------|-------------------|-------------------|-----------------------|
| | | lo es. Fill in the details. | | | | | | |
| | | | Nature o | of the case | Court or age | ncy | | Status of the case |
| | | Case title | CONTR | ACT | Cook County | Circuit Court | | Pending |
| | | Sir Finance Corp v. Carolyn Davis | | | Court Name | Olicult Court | | On appeal |
| | | Case number | | | 50 West Wash | | | - Concluded |
| | | 2015-M1-110133 | | | Number Stree | | 00000 | Concluded |
| | | | | | Chicago City | Illinois State | 60602 Zip Code | _ |
| | | Case title | | | - Oily | Oldio | Lip oodo | Пъ.: |
| | | | | | Court Name | | | Pending |
| | | 0 | | | Court Name | | | On appeal |
| | | Case number | | | Number Stree | et | | Concluded |
| | | | | | City | State | Zip Code | _ |
| |] | Yes. Fill in the information below. Creditor's Name | | Describe the prop | erty | | Date | Value of the property |
| | | | | Explain what happened | | | | |
| | | Number Street City State Zip Co | ode | Property was re Property was fo Property was ga | reclosed. | evied. | | |
| | | | | Describe the propo | erty | | Date | Value of the property |
| | | | | | | | | |
| | | Creditor's Name | _ | | | | | |
| | | N. oler Otroit | | Explain what happ | ened | | | |
| | | Number Street | | Property was re Property was fo | reclosed. | evied | | |
| | | City State Zip Co | ode | Floperty was at | iau ieu, seizeu, Of I | evieu. | | |

| Deb | tor 1 | | <u>1 03/29/16 Entered @3/29/16 /14/2</u> 4: cument Page 46 of 72 | 38 Desc | <u>Main</u> |
|------|----------|--|---|--------------------------|-------------------------|
| 11. | | | creditor, including a bank or financial institution, set of | ff any amounts fr | om your |
| | | No Yes. Fill in the details. | | | |
| | | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Number Street | Last 4 digits of account number: XXXX- | | |
| | | | Last 4 digits of account number. 70000 | | |
| | | City State Zip Code | | | |
| 12. | | nin 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official? | your property in the possession of an assignee for th | e benefit of credi | tors, a court-appointed |
| | | No Yes | | | |
| Part | 5: | List Certain Gifts and Contributions | | | |
| 13. | Wi | thin 2 years before you filed for bankruptcy, did you | give any gifts with a total value of more than \$600 per | person? | |
| | ✓ | No Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code Person's relationship to you | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | | | | |

| | | FIRST Name | ivilddie Name D | ocument Page 47 of 72 | | |
|------|------------|--|-------------------------------|--|-----------------------------------|------------------------|
| 14. | With | nin 2 years before you fi | | give any gifts or contributions with a total value of mor | e than \$600 to an | y charity? |
| | | No Yes. Fill in the details for | each gift or contribution. | | | |
| | | Gifts with a total value per person | of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | | Charity's Name | | - | | |
| | | | | - | | |
| | | Number Street | | _ | | |
| Dow | c. | City Sta | • | | | |
| Part | With | in 1 year before you file | | ou filed for bankruptcy, did you lose anything because | of theft, fire, othe | r disaster, or |
| | <u> </u> | bling? No | | | | |
| | ш | Yes. Fill in the details. Describe the property you how the loss occurred | - | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
| | | | | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | | |
| | | | | | | |
| Part | 7 : | List Certain Paymer | nts or Transfers | | | |
| 16. | seek | ing bankruptcy or prepare | aring a bankruptcy petition | or anyone else acting on your behalf pay or transfer any p? !it counseling agencies for services required in your bankrupto | | ne you consulted about |
| | _ | No | ocy pennon preparers, or cred | iii couriseiing agencies for services required in your barikrupic | у. | |
| | ✓ | Yes. Fill in the details. | | | | |
| | | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | Semrad Law Firm - \$150.00 | 3/29/2016 | \$150.00 |
| | | Person Who Was Paid | | - | | · |
| | | 20 South Clark Street 28 | th Floor | _ | | |
| | | Number Street | | _ | | |
| | | Chicago Illir | nois 60606 | | | |
| | | City Sta | ate Zip Code | - | | |
| | | Email or website address | | | | |
| | | Person Who Made the Pa | ayment, if Not You | | | |
| | | Person Who Was Paid | | - | | |
| | | Number Street | | - - | | |
| | | City Sta | ate Zip Code | - | | |
| | | Email or website address | | - | | |
| | | Person Who Made the Pa | ayment, if Not You | | | |

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| 7. | | | | ocument Page 48 of 72 | <u> </u> | | | |
|----|-------|---|--------------------|---|---------------------|----------------------|-----------|---------------|
| | you | nin 1 year before you filed for bar deal with your creditors or to ma not include any payment or transfer t | ke payments to you | | y or transfer any | oroperty to anyor | ne who į | promised to h |
| | | No | | | | | | |
| | 뇓 | No | | | | | | |
| | ш | Yes. Fill in the details. | | | | _ | _ | |
| | | | | Description and value of any proper | rty transferred | Date payment | Amou | nt of payment |
| | | | | | | or transfer was made | | |
| | | | | | | wasmade | | |
| | | Person Who Was Paid | | - | | | - | |
| | | 1 erson who was raid | | | | | | |
| | | Number Street | | - | | | | |
| | | | | | | | | |
| | | - | | - | | | | |
| | | | | _ | | | | |
| | | City State | Zip Code | | | | | |
| | trans | sfers that you have already listed on No | | ty (such as the granting of a security inter | est or mortgage on | your property). Do | not incl | ude gifts and |
| | Ш | Yes. Fill in the details. | | | | | | |
| | | | | Description and value of any | | property or paym | | Date transfe |
| | | | | property transferred | received or d | ebts paid in exch | ange | was made |
| | | | | - | | | | |
| | | Person Who Received Transfer | | | | | | |
| | | Number Street | | - | | | | |
| | | | | | | | | |
| | | | | - | | | | |
| | | | | | | | | |
| | | City | 7in Codo | - | | | | |
| | | City State Person's relationship to you | Zip Code | • | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | |
| | | , | Zip Code | | | | | |
| | | Person's relationship to you | Zip Code | - | | | | |
| | | Person's relationship to you | Zip Code | | | | | |
| | | Person's relationship to you Person Who Received Transfer | Zip Code | | | | | |
| | | Person's relationship to you Person Who Received Transfer | Zip Code | | | | | |
| | | Person's relationship to you Person Who Received Transfer Number Street | | | | | | |
| | | Person's relationship to you Person Who Received Transfer Number Street City State | Zip Code Zip Code | | | | | |
| | | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you | Zip Code | | | | | |
| | | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for I | Zip Code | transfer any property to a self-settled | trust or similar de | evice of which yo | u are a l | beneficiary? |
| | | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you | Zip Code | transfer any property to a self-settled | trust or similar de | evice of which yo | u are a l | beneficiary? |
| | (The | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for I | Zip Code | transfer any property to a self-settled | trust or similar de | evice of which yo | u are a l | beneficiary? |
| | (The | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for I see are often called asset-protection | Zip Code | I transfer any property to a self-settled | trust or similar de | evice of which yo | u are a l | beneficiary? |
| | (The | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for less are often called asset-protection. | Zip Code | | | evice of which yo | u are a l | |
| | (The | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for less are often called asset-protection. | Zip Code | transfer any property to a self-settled Description and value of the prope | | evice of which yo | u are a l | · |
| | (The | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for less are often called asset-protection. | Zip Code | | | evice of which yo | u are a l | Date transfe |
| | (The | Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for less are often called asset-protection. | Zip Code | | | evice of which yo | u are a l | Date transfe |

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| | | <u> </u> | |
|---------|---------------------------------|---|--|
| Part 8: | List Certain Financial Accounts | s, Instruments, Safe Deposit Boxes, and Storage Units | |

| 20. | or tr | nin 1 year before you filed for ansferred? de checking, savings, money m peratives, associations, and other | arket, or other financial | | | | | | |
|-----|----------|--|---------------------------|-------------|-------------------------|---------------|-------------------------------|---|---|
| | | No Yes. Fill in the details. | | | | | | | |
| | | | | Last 4 numb | digits of account er | Type o | of account or ment | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was Paid | | - XXXX- | | | necking avings | | |
| | | Number Street | | _ | | Br | oney market okerage her | | |
| | | City State | Zip Code | _ | | | | | |
| | | Person Who Was Paid | | - XXXX- | | | necking avings | | |
| | | Number Street | | _ | | Md | oney market okerage | | |
| | | - | | _ | | | her | | |
| | | City State | Zip Code | _ | | | | | |
| | valu | you now have, or did you have ables? No Yes. Fill in the details. | | | had access to it? | | Describe the contents | | Do you still have it? |
| | | Name of Financial Institution | <u></u> N | ame | | | - | | ☐ No |
| | | Number Street | N | lumber | Street | | - | | Yes |
| | | | | ity | State | Zip Code | - | | |
| 22. | Have | City State e you stored property in a sto | Zip Code | her than | your home within | 1 year before | you filed for bankruptcy | ? | |
| | ✓ | No Yes. Fill in the details. | | | | • | | | |
| | Ц | res. Fill lift the details. | v | Vho else | had access to it? | | Describe the contents | 3 | Do you still have it? |
| | | Name of Storage Facility | N | ame | | | - | | ☐ No ☐ Yes |
| | | Number Street | N | umber | Street | | - | | — 163 |
| | | | | ity | State | Zip Code | - | | |
| | | City State | Zip Code | | | | | | |

| Deb | otor 1 | CarolynCase 16-10696 Doc 1 First Name Middle Name | Filed 03½ Docume | <u>89/16 Er</u> ⁵r∖it ^{me} Paç | ntered @3/2 ge 50 of 72 | 19/116/11/4::24:38 Desc Mail | 1 |
|------|-----------------|--|--|---|---|--|-----------------|
| Part | 9: | Identify Property You Hold or Contro | I for Someo | ne Else | | | |
| 23. | Do y | you hold or control any property that someone No Yes. Fill in the details. | e else owns? Ir | nclude any pro | perty you borro | owed from, are storing for, or hold in tru | st for someone. |
| | ш | Too. I ill ill die detaile. | Where is the | e property? | | Describe the contents | Value |
| | | Owner's Name | Number Stre | eet | | - | |
| | | Number Street | | | | - | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | _ | | | | |
| Par | t 10: | Give Details About Environmental In | nformation | | | | |
| For | the p | urpose of Part 10, the following definitions apply: | | | | | |
| | ha in Sor | nvironmental law means any federal, state, or loca azardous or toxic substances, wastes, or material is cluding statutes or regulations controlling the clearite means any location, facility, or property as defined used to own, operate, or utilize it, including disposazardous material means anything an environment | nto the air, land, nup of these sul ed under any env sal sites. | soil, surface wa bstances, waste vironmental law, | ater, groundwater, es, or material. whether you now | , or other medium, rown, operate, or utilize it | |
| | oort al | xic substance, hazardous material, pollutant, contain I notices, releases, and proceedings that you know any governmental unit notified you that you re | about, regardle | ess of when they | | violation of an environmental law? | |
| | | No Yes. Fill in the details. | | | | | |
| | _ | | Governmen | ntal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | Governmenta | al unit | | - | |
| | | Number Street | Number Stre | eet | | _ | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | _ | | | | |
| 25. | Hav | e you notified any governmental unit of any re | elease of hazar | dous material | ? | | |
| | | Yes. Fill in the details. | | | | | |
| | | | Governmen | ntal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | Governmenta | al unit | | - | |
| | | Number Street | Number Stre | eet | | - | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | | | | | |

| Debt | tor 1 | CarolynCase 16-10 First Name | 0696 Doc 1 Middle Name | | | Entered Page 51 | | h16/1k4i24: <u>38</u> | Desc Main | |
|------|----------|---|-----------------------------------|--------------|------------------------|--------------------|---|-----------------------|----------------------|--------------------|
| 26. | Hav | e you been a party in a | ny judicial or admini | strative p | roceeding under | any environn | nental law | ? Include settlements | s and orders. | |
| | ✓ | No | | | | | | | | |
| | | Yes. Fill in the details. | | Car | | | | Notice of the same | | Ctatus of the |
| | | | | COL | urt or agency | | | Nature of the case | | Status of the case |
| | | Case title | | | | | | | | Pending |
| | | | | Cou | ırt Name | | | | | On appeal |
| | | | | Nun | nber Street | | | | | Concluded |
| | | Case number | | — City | Stat | te Zip (| Code | | | |
| Part | 11. | Give Details Abou | t Vour Business | | | · | 1 | | | |
| raii | | | | | | | | | | |
| 27. | With | nin 4 years before you f | iled for bankruptcy, | did you o | wn a business o | r have any of t | the followi | ng connections to ar | ny business? | |
| | | | self-employed in a tra | • | | • | me or part- | time | | |
| | | A member of a limit A partner in a partner | ed liability company (L ership | LC) or IIm | nited liability partne | ersnip (LLP) | | | | |
| | | | or managing executive | of a corp | oration | | | | | |
| | | An owner of at least | 5% of the voting or e | quity secu | rities of a corporati | ion | | | | |
| | | No. None of the above ap | | utoilo bolov | u far aaab businaa | | | | | |
| | Ц | Yes. Check all that apply | above and IIII in the de | etalis delov | Describe the na | | usiness | Employer lo | dentification numb | er Do not |
| | | | | | | | include Social Security number or ITIN. | | | |
| | | Business Name | | | | | EIN: | | | |
| | | Number Street | | | | | | Dates busin | ess existed | |
| | | | | | Name of accou | intant or book | keeper | | | |
| | | City S | tate Zip Co | de | | | | From | To | _ |
| | | | | | | | | | | |
| | | | | | Describe the na | ature of the bu | usiness | | dentification numb | |
| | | Business Name | | | | | | EIN: | | |
| | | Number Street | | | | | | Dates busin | ess existed | |
| | | | | | Name of accou | intant or book | keeper | | | |
| | | City S | tate Zip Co | de | | | | From | To | _ |
| | | | | | | | | | | |
| | | | | | Describe the na | ature of the bu | usiness | | dentification numb | |
| | | | | | | | | | cial Security number | er or ITIN. |
| | | Business Name | | | | | | EIN: | | |
| | | Number Street | | | Name of accou | intant or book | keener | Dates busin | ess existed | |
| | | City S | tate Zip Co | ide | . Tarrio or accou | | ооры | From | To | |
| | | Only 3 | ιωιο Δι ρ Ο Ο | | | | | | | _ |
| | | | | | | | | | | |

| Debtor | | ed 03½9/16 Entered 03/29/16 @4-24: <u>38 Desc Main</u> ocumenter Page 52 of 72 |
|----------|---|--|
| | | give a financial statement to anyone about your business? Include all financial institutions, |
| <u>√</u> | No Yes. Fill in the details below. | |
| _ | - | Date issued |
| | Name | MM/DD/YYYY |
| | Number Street | |
| | City State Zip Code | _ |
| Part 12 | Sign Below | |
| and | d correct. I understand that making a false statement, | Affairs and any attachments, and I declare under penalty of perjury that the answers are true, concealing property, or obtaining money or property by fraud in connection with a prisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 3/29/2016 | Date |
| Dic | I you attach additional pages to Your Statement of Fin No Yes | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Dic | you pay or agree to pay someone who is not an attor | rney to help you fill out bankruptcy forms? |
| ✓ | No | |
| | Yes. Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| Debtor Chapter DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEB 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that con year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the petition of the petition in bankruptcy. | | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEB 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that con year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the | TOR | | | | | | | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that con year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the | | | | | | | | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that con year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the | | | | | | | | |
| year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the | | | | | | | | |
| in connection with the bankruptcy case is as follows: | | | | | | | | |
| For legal services, I have agreed to accept | | | | | | | | |
| Prior to the filing of this statement I have received | \$150.00 | | | | | | | |
| Balance Due | \$3,850.00 | | | | | | | |
| 2. The source of the compensation paid to me was: Other (specify) | | | | | | | | |
| 3. The source of the compensation paid to me is: ☐ Other (specify) | | | | | | | | |
| 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | | | |
| I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. | | | | | | | | |
| In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; | | | | | | | |
| b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; | | | | | | | | |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; | | | | | | | | |
| d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | | | | | | |
| 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: | By agreement with the debtor(s), the above-disclosed fee does not include the following services: | | | | | | | |
| CERTIFICATION | | | | | | | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debt proceedings. | tor(s) in this bankruptcy | | | | | | | |
| 3/29/2016 /s/ Mark Bernachea | | | | | | | | |
| Date Signature of Attorney | | | | | | | | |
| Semrad Law Firm | | | | | | | | |
| Name of law firm | | | | | | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

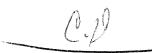
A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate



tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 150.00 toward the flat fee, leaving a balance due of \$ 3850.00 ; and \$ 72.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 03/29/2016

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$310 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$235 | filing fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 14:24:38 Desc Main UNITED STATES BANKBURICY COURT Northern District of Illinois

| In re: | Davis, Carolyn | Case No |
|--|----------------|--|
| _ | Debtor(s) | 0.000 110. |
| | | Chapter. Chapter13 |
| | VERIFICA | ATION OF CREDITOR MATRIX |
| The above named Debtors hereby verify that the | | the attached list of creditors is true and correct to the best of their knowledge. |
| | | |
| Date: | 3/29/2016 | /s/ Davis, Carolyn |
| | | Davis, Carolyn |
| | | Signature of Debtor |

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SANTANDER PO BOX 961245 FORT WORTH, TX 76161

TEK COLLECT PO Box 1269 Columbus , OH 43216

JVDB ASC PO Box 5718 Elgin , IL 60121

Jerry Salzberg LLC P.O Box 5718 Elgin , IL 60121

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL 60601

CREDIT UN 1 200 E CHAMPAIGN AV RANTOUL , IL 61866

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK , VA 23502

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK , VA 23502

ESCALLATE LLC 1606 E TURKEYFOOT LAKE R AKRON , OH 44312

RECEIVABLES PERFORMANC 20816 44th Avenue W Lynnwood , WA 98036

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601

EOS CCA PO BOX 981008 BOSTON , ME 02298

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL 32256

Convergent po box 1022 Wixom , MI 48393

SNCHNFIN 1900 Hassell Rd Hoffman Est , IL 60169 Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 14:24:38 Desc Main Document Page 66 of 72

CCI 501 Greene Street # 302 Augusta , GA 30901

SANTANDER PO BOX 961245 FORT WORTH, TX 76161

TEK COLLECT PO Box 1269 Columbus , OH 43216

JVDB ASC PO Box 5718 Elgin , IL 60121

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL 60601

CREDIT UN 1 200 E CHAMPAIGN AV RANTOUL, IL 61866

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA 23502

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA 23502

ESCALLATE LLC 1606 E TURKEYFOOT LAKE R AKRON , OH 44312

RECEIVABLES PERFORMANC 20816 44th Avenue W Lynnwood , WA 98036

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL 60601

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SNCHNFIN 1900 Hassell Rd Hoffman Est , IL 60169 Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 14:24:38 Desc Main Document Page 67 of 72

CCI 501 Greene Street # 302 Augusta , GA 30901

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604

STELLAR RECOVERY INC 4500 Salisbury Rd Ste 10 Jacksonville , FL 32216

Progressive Leasing 10619 South Jordan Gateway # 100 South Jordan , UT 84095

Portfolio Recovery Associates PO Bo x12914 Norfolk , VA 23541

City of Hometown 4331 Southwest Highway Hometown , IL 60456

| Case 16-10 | 0696 Doc 1 Filed 03/2 | 29/16 Entered 03/29/16 14 | l:24:38 Desc Main |
|---|--|---|---|
| Debtor 1 Carolyn | Docume | | |
| First Name | Middle Name L | ast Name | |
| Part 6: Answer These Qu | uestions for Reporting Purpose | | |
| 16. What kind of debts do you have? | as "incurred by an individue No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily obtain money for a busine investment. No. Go to line 16c. Yes. Go to line 17. | r consumer debts? Consumer debts ual primarily for a personal, family, or business debts? Business debts a ess or investment or through the oper u owe that are not consumer debts of therTypesOfDebt: "" | r household purpose." re debts that you incurred to ration of the business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availab No. Yes. | 7. Go to line 18. o you estimate that after any exempt property is ble to distribute to unsecured creditors? | e excluded and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | |
| For you | and correct. If I have chosen to file under Ch | nd I declare under penalty of perjury to apter 7, I am aware that I may proce ode. I understand the relief available | ed, if eligible, under Chapter 7, 11,12, |

proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X

X

| _/s/ Carolyn Davis | Carry | Caris |
|-----------------------|-------|-------|
| Signature of Debtor 1 | / | |

Signature of Debtor 2 Executed on

Executed on ___3/29/2016 MM / DD / YYYY

MM / DD / YYYY

Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 14:24:38 Desc Main Page 69 of 72 Document Fill in this information to identify your case: Debtor 1 Carolyn Davis First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? **√** No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Signature of Debtor 2

MM/DD/YYYY

Date

that they are true and correct.

MM/DD/YYYY

★ Isl Carolyn Davis
 Signature of Debtor 1

Date 3/29/2016

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| Debtor 1 | Carolyn | | L | DOCUMENT P | Case number (if known) |
|------------------|------------------------------------|---------------------|---|--------------------------|--|
| | First Name | | Middle Name | Last Name | Case number (a known) |
| | thin 2 years be ditors, or othe | | bankruptcy, did yo | ou give a financial stat | ement to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the | details below. | | | |
| fearing | | | | Date issued | |
| | Name | | *************************************** | MM/DD/YYYY | |
| | Number S | treet | | | |
| | City | State | Zip Code | | |
| Part 12: | Sign Belo | w | | | |
| and o | correct. I underruptcy case ca | erstand that makir | ig a false statemei ip to \$250,000, or ii | nt, concealing propert | hments, and I declare under penalty of perjury that the answers are true y, or obtaining money or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date |
| | D | ate 3/29/2016 | | | |
| Did y | ou attach add | litional pages to Y | our Statement of I | Financial Affairs for Ir | dividuals Filing for Bankruptcy (Official Form 107)? |
| Lamed parties | No Yes | | | | |
| Did y | ou pay or agre | ee to pay someon | e who is not an att | orney to help you fill o | out bankruptcy forms? |
| V V | No | | | | |
| | res. Name of pe | erson | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 14:24:38 Desc Main Document Page 71 of 72

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Davis, Carolyn | Case No | | | | | | | |
|--------|---|---------------------------------------|--|--|--|--|--|--|--|
| | Debtor(s) | | | | | | | | |
| | | Chapter. Chapter13 | | | | | | | |
| | VERIFICATION OF CREDITOR MATRIX The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge | | | | | | | | |
| Date: | 3/29/2016 | /s/ Davis, Carolyn Amby Carry | | | | | | | |
| | | Davis, Carolyn Signature of Debtor | | | | | | | |

Case 16-10696 Doc 1 Filed 03/29/16 Entered 03/29/16 14:24:38 Desc Main Document Page 72 of 72

| Deb | tor 1 | Carolyn | | Davis | . ago . 2 | Case number (# known) | | |
|--------------------|-----------|--|--------------------------------|---------------------|-------------------|--|--------------------------|-------------|
| or one ways of the | | First Name | Middle Name | Last Name | | | | |
| 16. | Cal | culate the median family inco | ne that applies to you. F | Follow these step | s: | | | |
| | 16a. | . Fill in the state in which you live | 2 . | Illinois | | | | |
| | 16b. | . Fill in the number of people in y | our household. | 1 | | | | |
| | 16c. | . Fill in the median family income | | | | | | \$49,682.00 |
| | | To find a list of applicable medi also be available at the bankru | | nline using the lir | nk specified in t | he separate instructions for t | his form. This list may | |
| 17. | Hov | w do the lines compare? | | | | | | |
| | 17a. | ✓ Line 15b is less than or eq U.S.C. § 1325(b)(3). Go t | • | | | • | determined under 11 | |
| | 17b. | | 3 and fill out Calculation | | | Disposable income is determicial Form 122C-2). On line 3 | | |
| Part | 3: | Calculate Your Commitm | ent Period Under 1 | 1 U.S.C. §13 | 25(b)(4) | | | |
| 18. | Сор | y your total average monthly | income from line 11. | | | | | \$2,249.03 |
| 19. | | luct the marital adjustment if mitment period under 11 U.S.C. § | | | - | - | - | |
| | 19a. | If the marital adjustment does n | ot apply, fill in 0 on line 19 | a. | | | | -\$0.00 |
| | 19b. | Subtract line 19a from line 1 | 8. | | | | | \$2,249.03 |
| 20. | Calc | culate your current monthly in | come for the year. Follow | v these steps: | | | | |
| | 20a. | Copy line 19b. | | | | | | \$2,249.03 |
| | | Multiply by 12 (the number of m | onths in a year). | | | | | x 12 |
| | 20b. | The result is your current month | nly income for the year for | this part of the fo | rm. | | | \$26,988.36 |
| | 20c. | Copy the median family income | for your state and size of | household from li | ne 16c. | | | \$49,682.00 |
| 21. | How | do the lines compare? | | | | | | |
| | Section 5 | Line 20b is less than line 20c. Un period is 3 years. Go to Part 4. | less otherwise ordered by | the court, on the | top of page 1 o | f this form, check box 3, The | commitment | |
| | - | Line 20b is more than or equal to commitment period is 5 years. Go | | e ordered by the | court, on the top | o of page 1 of this form, chec | k box 4, <i>The</i> | |
| Part | 4: \$ | Sign Below | | | | | | |
| | | By signing here, I declare under | penalty of perjury that the | information on th | is statement an | d in any attachments is true | and correct. | |
| | | ★ /s/ Carolyn Davis | arch Mis | | × | | | |
| | | Signature of Debtor 1 | T On ' | _ | Signature o | of Debtor 2 | | |
| | | Date 3/29/2016 | | | Date | | | |
| | | MM/DD/YYYY | | | MM/ | DD/YYYY | | |
| | | If you checked 17a, do NOT fill of | | farma On line 20 a | of that form our | and the same and t | an farma lina dd ah ar a | |